

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

AS FILED AFTER 1ST AMENDMENT AFTER 2ND AMENDMENT

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TOTAL IND.

2

TOTAL DEP.

7

TOTAL CLAIMS

9



TOTAL IND.

2

TOTAL DEP.

7

TOTAL CLAIMS

9

